CFS 8400E April, 2011

With Instructions

Type of Review:
TLP
Date printed:
4/4/2011

TLP Page 1 of 25

Section:	Opening Comments
Requirement:	Opening Comments

Indicator #	Opening Comments.					
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason		
Comments:						

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Section:	Section 1.1 - General requirements – Policies and Procedures
Requirement:	(a) The General Program description approved by SRS Children and Family Services or JJA for each Program shall include but not be limited to the goals of the program, resident behavioral management system, job descriptions (responsibilities, functions, and qualifications), policies and procedures, daily living activities, health services, recreation activities, and visitation policies.
	(b) The continuum of services delivered by the Program to meet a variety of youth's needs shall be explicitly delineated in the general program description. Each Program description shall include, but not be limited to: the goals of the program; resident behavior management system; daily living activities; life skill development, health services; recreation activities; and, visitation policies. In addition, SRS and JJA will review all marketing, public relations material and website content to evaluate the Program's primary program purpose.

Policies, Procedures or Documents

Indicator #		eview program description, including requirements of (b).					
Compliance:		Substantially Met	Partially Met	Not Applicable	Reason		
Comments:							

Source:

Policies. Procedures or Documents

Indicator #		eview p/p.					
Compliance:		Substantially Met	Partially Met	Not Applicable	Reason		
Comments:							

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Section:	Section	Section 1.2 - General Staff requirements						
Requirement:	(1) Prov (2) Coo a) Ti (3) Day	Residential services must be: (1) Provided under the supervision of a Bachelor's level administrator; (2) Coordinated by a Bachelor's level TLP Program case coordinator; a) The youth to case coordinator ratio in a TLP Program is 1:16. (3) Day to day life skills shall be monitore by Life Coaches with a High School diploma or G.E.D. (4) TLP staff must be 21 years of age or have evidence of exception granted by the contracting agency.						
Source: HR Files								
Indicator #			Review case coordinator job description	on and HR file. Check ratio assignment	s.			
Compliance:			Substantially Met	Partially Met	Not Applicable	Reason		
Comments:								
Source: HR Files								
Indicator #			Review personnel files for age requirer	ments.				
Compliance:			Substantially Met	Partially Met	Not Applicable	Reason		
Comments:								
Source: HR Files								
Indicator #			Review case coordinator personnel file for compliance with (2)					
Compliance:			Substantially Met	Partially Met	Not Applicable	Reason		
Comments:								
Source: HR Files								
Indicator #			Review administrator job description a	ind HR file.				
Compliance:			Substantially Met	Partially Met	Not Applicable	Reason		
Comments:								
Source: HR Files								
Indicator #	Review administrator personnel file or contract for compliance with (1)							
Compliance:			Substantially Met	Partially Met	Not Applicable	Reason		
Comments:								
<u>Source:</u> HR Files								
Indicator #			Review Life Coach job description and	HR file.				
Compliance:			Substantially Met	Partially Met	Not Applicable	Reason		
Comments:								

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Policies, Procedures or Documents

Indicator #	Review p/p.	eview p/p.					
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason			
Comments:			•				

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Section:	Section 2.1 - Placement Agreement
Requireme	A Placement Agreement must be completed between the provider and the referring agency. A copy of the Placement Agreement must be kept in the youth's file at the Program.

Policies, Procedures or Documents

Indicator #	Peview p/p.					
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason		
Comments:						

Source:

Case Records

Indicator #	eview documentation.				
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason	
Comments:					

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Section:	Section 2.2 - Admission Criteria
Requirement:	Youth placed in a TLP Program must:
	- Be at least 16 years of age.
	- Be working towards full or part-time employment.
	- Be working towards a diploma or equivalent (if not already obtained).
	- Have demonstrated a basic knowledge of life skills.
	- Youth are required to maintain a savings account to be held in trust by the TLP.
	- A list of support services needs as identified by the referring agency is required upon admission.

Policies, Procedures or Documents

Indicator #		Review p/p.	view p/p.					
Compliance:		Substantially Met	Partially Met	Not Applicable	Reason			
Comments:								

Source:

Case Records

Indicator #	ook for the identified support services from the referring agency upon admission.				
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason	
Comments:					

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Section:	Section 2.3 - Basic Life Skills Admission Criteria
Requirement:	Prior to consideration for admission to any TLP service youth MUST be able to demonstrate knowledge of basic life skills. Youth in TLP services must be provided the opportunity to
	practice the skills necessary to live independently. These skills, at a minimum, shall include:
	- Preparing meals and basic nutrition education;
	- Doing laundry;
	- Maintaining a clean, orderly, and safe living space;
	- Living cooperatively with other housemates or neighbors;
	- Handling landlord/tenant complaints;
	- Controlling guests' behavior;
	- Handling basic maintenance, simple repairs, and how to call the landlord about problems;
	- Developing and following a budget;
	- Access to routine transportation (e.g., public transportation, carpool);
	- Shopping, food preparation, food storage, and consumer skills.

Case Records

Indicator #	Review savings account information.				
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason	
Comments:					

Source:

Case Records

Indicator #	Review age, employment status and educational status of the youth.				
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason	
Comments:					

Source:

Case Records

Indicator #		ook for evidence that youth had basic life skills knowledge upon admission.					
Compliance:		Substantially Met	Partially Met	Not Applicable	Reason		
Comments:							

Source:

Policies, Procedures or Documents

Indicator #	Review p/p.				
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason	
Comments:					

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Section: Section 3.1 - Envorinmental Requirement: Envorinmental: · Youth reside in apartments within one building or complex (contained apartments). Each youth must be afforded sufficient bedroom space to insure adequate privacy, safety and security. The provider must insure the environmental safety of the apartment is in compliance with local over sight agencies such as HUD. Fire Marshall, Municipalities, Apartment Management, The provider shall make available certain articles and supplies for furnishing the youths residence. The articles and supplies may be new or used, but must be in good condition. The articles and supplies must include, but are not limited to:

- A bed and bed linens:
- A dining table and chairs;
- Living or sitting room furniture;
- A stove and refrigerator;
- Kitchen furnishings (e.g., pots, pans, cooking and eating utensils);
- Basic cleaning supplies:
- Landline telephone:
- Utilities (e.g., water, trash, electricity, gas);
- Access to laundry services;
- Food in sufficient quantity to provide at least three (3) nutritionally balanced meals per day;
- Kitchen and bath linens:
- Entertainment equipment (e.g., television, stereo, video games) are optional, if not provided, youth should be provided the opportunity to purchase these items when they are financially capable:
- Emergency transportation when routine transportation is not available:
- Administration, oversight of youth's trust:
- Financial guidance to youth (e.g., budgeting, consumer skills).

All youth in TLP placements shall have twenty-four (24) hour access to on-site program staff that is responsible for monitoring the activities of youth in their programs. Program staff shall develop a schedule for providing supervision with guidance based on a specific youth's maturity, acquired skills, and emotional status. The supervisory schedule shall be designed so that staff may observe that the youth is practicing healthy and responsible life skills and will be developed in collaboration with a youth's referring agency. This collaboration will determine the frequency and type of supervision/support provided to the youth.

Source:

Policies. Procedures or Documents

Indicator #	Review p/p.				
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason	
Comments:					

Source:

Policies. Procedures or Documents

Indicator #	ook for evidence of compliance with local oversight agencies.					
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason		
Comments:						

Source:

Appartment Tour

Indicator #	Check living areas for required comp	Check living areas for required components.				
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason		
Comments:						

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Section:	Section 3.2 - Program / Scope of Services
Requirement:	Youth are further prepared for adulthood by being provided a realistic living experience, through transitional living placements in which they can take increasing responsibility for themselves. Elements of those living experiences include, but are not limited to, the following: - Direct experience with the consequences of daily actions and decisions; - Life skills practice while having access to staff for support and advice; - Daily social contacts; - Emotional adjustment to the difference between present living situation and previous ones; - Practice living alone; - Use of leisure time; - Obtaining and using transportation to access needed resources These experiences must also be tailored to a youth's current level of functioning. Additional experiences and opportunities may be introduced as a youth's skill level increases and more complex opportunities are desired.
	Youth in transitional living placements may need access to supportive services including but not limited to the following categories: - Mental health services - Alcohol and substance abuse treatment services - Educational/vocational support services - Individual counseling - Sex Offender treatment services - Pro-social recreational activities - Preventative, routine and emergency health care - Routine transportation

Policies, Procedures or Documents

Indicator #	Review p/p.				
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason	
Comments:		•	•		

Source:

Case Records

Indicator #		Review case file for service access plan and implementation.				
Compliance:		Substantially Met	Partially Met	Not Applicable	Reason	
Comments:						

Source:

Policies Procedures or Documents

Indicator # Review resource base (list of resources) utilized by Case Coordinator.						
Compliance:		Substantially Met	Partially Met	Not Applicable	Reason	
Comments:						

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Section:	Section 3.3 - Initial Assessment
Requirement:	Initial Assessment: The admission service access request provided by the referring agency shall constitute the initial assessment.
	Additional Assessments: The case coordinator or life skills coach may administer life skills assessments as needed to further identify needs to be addressed in the service access plan.

Policies, Procedures or Documents

Indicator #	Review p/p.				
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason	
Comments:					

Source:

Case Records

Indicator #	Review case record.				
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason	
Comments:					

Source:

Case Records

Indicator #	Review LOC (level of care) a	Review LOC (level of care) assessment and other evaluations conducted by the facility.				
Compliance: Substantially Met Partially Met Not Applicable Reason				Reason		
Comments:						

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Section:	Section 3.4 - Service Access Plan
Requirement:	Plan requirements: Each youth residing in transitional living must have a service access plan based on needs identified by the provider and the referring agency. Any assessment documents must be included in the case record. The service plan shall be established by the end of 3 working days from admission. Service plans should be updated whenever new needs are identified or when goals are met. Service plans should be reviewed and revisions made at least every 30 days.
	The service plan shall include:Long-term goals in the areas of physical health, family relations, daily living skills, academic and/or vocational skills, interpersonal relations, and emotional/psychological health as appropriateShort-term goals that help the youth reach his/her long-term goals in the areas identified aboveEstimated time for reaching short-term goalsYouth's signature indicating his/her participation in the development of the service plan.
	The service plan shall be reviewed, revised, and documented in a progress report at least every 30 days by the Program. Information obtained from the youth, parent, guardian, referring agency, employers or service providers shall be considered in the report.

Case Records

Indicator #	Check for 30 day reviews.				
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason	
Comments:					

Source:

Policies, Procedures or Documents

Indicator #	Review p/p.				
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason	
Comments:					

Source:

Case Records

Indicator #	Review case record.					
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason		
Comments:						

Source:

Case Records

Indicator #	Check for program objectives.				
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason	
Comments:			•		

Source:

Case Records

Indicator #	Check for signatures on reviews.				
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason	
Comments:					

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Section:	Section 3.5	- Discharge / Aftercare Plan	harge / Aftercare Plan					
	Discharge pl planning the goals which	discharge of a resident from the P the youth have reached. Written re	elude discharge planning. g shall begin upon admission of the youth to the Program. At a minimum, the resident, the resident's parents or guardian, and the placing agency should be involved in arge of a resident from the Program. A discharge summary shall be completed at the time of the youth's discharge. This shall include delineation of after-care plans and uth have reached. Written recommendations for aftercare shall be made and should specify the nature, frequency, and duration or services the Program recommends plan shall also document who the responsible parties are for aftercare services.					
<u>Source:</u> Case Records	ioi iic youii			C 3GI WCC3.				
Indicator #		Review discharge planning.						
Compliance:		Substantially Met	Partially Met	Not Applicable	Reason			
Comments:								
Source: Policies, Procedures	or Documen	ts						
Indicator #		Review p/p.						
Compliance:		Substantially Met	Partially Met	Not Applicable	Reason			
Comments:								
Source: Case Records								
Indicator #		Review case record.						
Compliance:		Substantially Met	Partially Met	Not Applicable	Reason			
Comments:			<u> </u>					
Source: Case Records								
Indicator #		Review closed files for after	care planning.					
Compliance:		Substantially Met	Partially Met	Not Applicable	Reason			
omments:								
<u>Source:</u> Case Records								
Indicator #		Review closed files for disc	harge summary.					
					_			

Indicator #	Review closed files for discha	eview closed files for discharge summary.					
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason			
Comments:			,				

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Section:	Section 3.6 - Visitation / Therapeutic home visits
Requirement:	Contacts between the resident and their parents/guardian shall be allowed while the resident is in care unless the rights of the parents have been terminated by court order or family contact is not in the resident's best interest.
	When home visits are a part of the program plan, there shall be pre and post home visit contacts between the youth, their family, and Program program staff regarding the home visit. Because the goal of placement is to return the youth to a family-like setting, it is important that home visits be carefully planned and executed in the best interests of permanency planning for the youth. All home visits shall be arranged through coordination with the child's custodial case manager.

Policies, Procedures or Documents

Indicator #	Review p/p.	view p/p.				
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason		
Comments:						

Source:

Case Records

Indicator #	eview case record for pre and post home visit documentation.				
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason	
Comments:					

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Section:	Section 4.1 - Resident's Rights / Privacy
Requirement:	a.) The staff of the Program shall allow privacy for each youth. The Program's design shall also provide supervision according to the ages and needs of the residents. Each resident shall have a quiet area where they can withdraw from the group when appropriate.

Policies, Procedures or Documents

Indicator #	eview p/p.				
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason	
Comments:					

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Section:	Section 4.1.1 - Resident's Rights / Communication
	b.) The Program shall have clearly written policies regarding visits, gifts, mail, E-mail and telephone (including cell phone) calls between the resident and their family, or guardian. These policies shall be made known to the resident and his/her family/guardian at or prior to admission. Residents shall be allowed to send and receive mail and have telephone conversations with family members/guardians unless it is not in the best interest of the youth, the safety and security of Program, or if a court order necessitates restrictions.
	If restrictions on communications or visits are necessary these shall be documented in the youths program plan and reviewed at the 30-day case reviews. The youths custodial case manager must be notified of any new restrictions to communications or visitation implemented by the Program prior to it's implementation.

Case Records

Indicator #	restrictions are noted review notification.				
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason	
Comments:		•			

Source:

Policies, Procedures or Documents

Indicator #	Review p/p.	view p/p.				
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason		
Comments:						

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Section:	Section 4.1.2 - Resident's Rights / Possessions
Requirement:	c.) A resident shall be allowed to bring personal possessions to the program and may acquire other possessions in accordance
	with the policies of the program. Prior to admission, information shall be made available to the youth and their parents/guardians concerning what possessions a youth may bring to the
	program and the kinds of gifts they may receive.

Case Records

Indicator #	Review literature provided to resident / family.				
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason	
Comments:					

Source:

Policies, Procedures or Documents

Indicator #	eview p/p.					
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason		
Comments:						

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Section:	Section 4.1.3 - Resident's Rights / Discipline
Requirement:	Discipline shall be consistent and not be physically or emotionally damaging. Youth shall not be subjected to cruel, sever, unusual, or unnecessary punishment. Youth shall not be
	subjected to remarks that belittle or ridicule them or their families. Residents shall not be denied food, mail, or visits with families as punishment. Seclusion shall not be utilized as a
	disciplinary measure. Only staff members shall discipline youth.

Policies, Procedures or Documents

Indicator #	Review p/p.				
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason	
Comments:					

Source:

Case Records

Indicator #	Review documented disciplinary measures.				
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason	
Comments:					

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Section:	Section	1 4.3 - Ei	mergency Safety Interventio	ergency Safety Interventions					
Requirement:	(2) Eme An eme Emerge develop The use from ha Physica only as Mechan restraint Each pr emerge	ergency s rgency s rgency safe mental a e of emer rming se al restrair a last restrical restricts are no rogram the ncy safe	Instances affecting youth in TLP Program: It is a possible to the severity intervention: It is a possible to the severity of the behavior, and the resident's chronological and a lage, size, gender, physical, medical, psychiatric condition, and personal history. Interventions must be performed in a manner that is safe, proportionate, and appropriate to the severity of the behavior, and the resident's chronological and all age, size, gender, physical, medical, psychiatric condition, and personal history. Interventions must be performed only through the use of nationally recognized restraint procedures applicable to this population designed to prevent a resident self or others by exerting external control over physical movement. In the application of physical force without any mechanical device, for the purpose of restricting the free movement of a resident's body. Physical restraint should be used resort after all verbal de-escalation techniques have failed and when the resident is at-risk of harming themselves or others. In the use of mechanical devices to restrict the free movement of the resident's body, most often for purposes of preventing self-destructive behavior. Mechanical not allowed in TLP Program residential Program. In that elects to utilize emergency safety interventions must have a written restraint policy and all staff must be trained to provide safe physical restraints in the event of an aftery intervention. Staff must be trained in authorized, well-recognized training programs for managing aggressive behavior. Staff training records must be kept as part of the spersonnel file and must be made available upon request. At the time of admission to a Program, the resident and parent/guardian must be oriented to the restraint policies						
					en acknowledgment shall be kept in the clie				
Source:									
Policies, Procedur	res or Docu	ıments							
Indicator #			Review p/p.						
Compliance:			Substantially Met	Partially Met	Not Applicable	Reason			
Comments:					1				
Source: Case Records									
Indicator #			Review restraint logs.						
Compliance:	nce: Substantially Met Partially Met Not Applicable Reason				Reason				
Comments:									
Source:									

Case Records

Indicator #		Look for required signatures.					
Compliance:		Substantially Met	Partially Met	Not Applicable	Reason		
Comments:							

Source:

HR Files

Indicator #		Review personnel files for documentation of required training.				
Compliance:		Substantially Met	Partially Met	Not Applicable	Reason	
Comments:						

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Policies, Procedures or Documents

Indicator #	Review written plan to limit use of restraints.				
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason	
Comments:					

Source:

Policies, Procedures or Documents

Indicator #		Ask for other effective techniques and	sk for other effective techniques and alternatives used by the facility.				
Compliance:		Substantially Met	Partially Met	Not Applicable	Reason		
Comments:							

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Section: Section 5.1 - Facility reporting - Critical Incidents Requirement: Critical Incident: Critical Incident is an occurrence that requires the provider to make a response that is not a part of the program's ordinary daily routine. Examples of critical incidents include, but are not limited to, suicide, attempted suicide, homicide, death of a resident, AWOL, injury that is either life-threatening or serious (see definition of serious youth injury), fire which requires fire department response, alleged maltreatment of a youth, assault by a youth resulting in criminal charges, sexual misconduct, or other act or situation which would require a response by law enforcement, the fire department, an ambulance, or another emergency response provider, or any event that has potential for news media coverage. Serious vouth injury: Any injury to a vouth that requires the youth to be hospitalized or receive significant medical treatment. Significant medical treatment is treatment that could not be handled by a trained health care person outside of the hospital or clinical setting. Critical Incident Reporting: - Critical incidents are to be reported to the youth's custodial case manager, KDHE, and the youth's parent or guardian when appropriate. - The Program must report the death of a youth immediately to the youth's custodial case manager with a written report within 24 hours of the event. - AWOL's are to be reported verbally to law enforcement and the custodial case manager immediately with a written report to the custodial case manager within 24 hours of the event. An immediate verbal notification is to be made to law enforcement and to the custodial case manager when the youth returns or is located. - All other critical incidents are to be reported verbally within 12 hours followed by a written report within 24 hours of the event.

Source:

Case Records

Indicator #		Review sample from log for compliance w/ reporting within proper time frame.				
Compliance:		Substantially Met	Partially Met	Not Applicable	Reason	
Comments:						

· If the critical incident involves abuse, neglect, or exploitation the Program must also follow mandated reporting requirements.

An administrative file of critical incidents must be kept by Program.

- All Program must have procedures for reporting critical incidents to administrative staff and recording critical incidents in the resident files.

Source:

Case Records

Indicator #		Review reports of critical incidents.				
Compliance:		Substantially Met	Partially Met	Not Applicable	Reason	
Comments:						

Source:

Case Records

Indicator #		Check critical incidents log.				
Compliance:		Substantially Met	Partially Met	Not Applicable	Reason	
Comments:						

Source:

Policies, Procedures or Documents

Indicator #		Review p/p.					
Compliance:		Substantially Met	Partially Met	Not Applicable	Reason		
Comments:							

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ection:	Section 6.1 - Education and training.
equirement:	Staff In-service Training: Each Program must have an in-service orientation/training program for new employees, which is especially directed toward the initial training needs of staff working directly with residents.
	a) Program policy and procedures manual
	b) Program emergency and evacuation procedures
	c) Emergency safety interventions (including management of aggressive or suicidal behavior and orientation to the Program's restraint policies and procedures)
	d) The handling of blood born pathogens
	e) Program discipline standards
	f) Abuse/neglect mandatory reporting laws g) Client record documentation policies and procedures
	g) Client record documentation policies and procedures h) Policies and procedures for resident medication management
	i) Resident rights
	j) Confidentiality laws
	k) Training in CPR/First Aid within 3 months of employment
	I) De-escalation techniques
	Each Program shall also have a written annual staff in-service training plan which addresses the annual training needs of all staff having direct contact with residents. This annual training is beyond or in addition to the initial 32-hour orientation training program. All TLP Program direct care staff, shall have a minimum of forty (40) documented clock hours of in-service training per year. Documentation shall be provided in each staff member's personnel record to include content, amount of time, trainer, and his/her qualifications. Topics shall include but not be limited to:
	a) CPR and First Aid b) Blood born pathogens
	c) Medications management
	d) Emergency safety interventions
	e) Substance abuse patterns
	f) Childhood and adolescent development (including developmental disorders)
	g) Childhood and adolescent psycho-pathology (including such topics as effects of abuse/neglect, reactive attachment disorders, separation anxiety disorders, ADHD)
	h) Childhood and adolescent sexuality issues, especially the effects of early sexual abuse
	i) De-escalation techniques

HR Files

Indicator # Review personnel files for annual training.					
Compliance:		Substantially Met	Partially Met	Not Applicable	Reason
Comments:					

Source:

Policies, Procedures or Documents

Indicator #		Review training curriculum.				
Compliance:		Substantially Met	Partially Met	Not Applicable	Reason	
Comments:						

Source:

Policies, Procedures or Documents

Indicator #	Review p/p.	Review p/p.					
Compliance:	Substantially Met	Partially Met	Not Applicable	Reason			
Comments:							

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Section:	Section 7.1 - Record Storage Requirements
Requirement:	Record Retention:
	Case records, including medical records, shall be maintained 5 years from the date of the youth's discharge or until completion of an on-going audit and production of a final audit report,
	whichever is longer.

Facility Tour

Indicator #		Ask where records are stored.					
Compliance:		Substantially Met	Partially Met	Not Applicable	Reason		
Comments:							

Source:

Policies, Procedures or Documents

Indicator #		Review p/p.					
Compliance:		Substantially Met	Partially Met	Not Applicable	Reason		
Comments:							

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Section:	Section 9.1 - Measurable outcomes:
Requirement:	All Transitional Living Program providers must meet the outcome standards, and be incompliance with data collection, and reporting; as stated by Social and Rehabilitative Services of Kansas, Division of Health Care Policy Mental Health.

Policies, Procedures or Documents

Indicator #		To be determined.				
Compliance:		Substantially Met	Partially Met	Not Applicable	Reason	
Comments:						

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Section:	Closing Comments
Daminamant.	Clasia e Communita
Requirement:	Closing Comments

Case Records

Indicator #		Closing Comments.					
Compliance:		Substantially Met	Partially Met	Not Applicable	Reason		
Comments:							

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